

**Haydock
Urban District Council**

**Annual Report
of the
Medical Officer of Health
1950.**

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**HAYDOCK URBAN DISTRICT COUNCIL
1950**

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Vice-Chairman of the Council :
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HEALTH DEPARTMENT :

Medical Officer of Health :
A. C. CRAWFORD, T.D., M.B., Ch.B., D.P.H., D.T.M.

Sanitary Inspector :
R. V. WATKIN, Cert.S.I.B., M.S.I.A.
Qualified Meat and Other Foods Inspector (R.S.I.)

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To the Chairman and Members of the Haydock U.D.C.

MR. CHAIRMAN, LADY AND GENTLEMEN,

I have pleasure in submitting for your consideration my Report on the health conditions of the Urban District for the year 1950, a year which has seen the progressive consolidation and fulfilment of schemes engendered by the National Health Service Act, 1946, and the National Assistance Act, 1948. Only one of the major provisions of the Health Service Act which prescribe the Local Health Authorities' duties now remains unfulfilled, i.e., the provision and administration of Health Centres, but the implementation of this plan must necessarily remain in abeyance pending an improvement in the national and international political and economic situations, and a more ready supply of labour and building materials.

In regard to the vital statistics for the year, the Crude Live Birth Rate of 17.6 per 1,000 population shews some decrease on the corresponding figure for 1949 of 18.9, and thus follows the prevailing general trend. Still-births were 5 in number, giving a Still-birth rate of 23 per 1,000 total births, practically the same as last year (22/1,000). The total deaths were 138, as compared with 121 in 1949, and the crude death rate, 11.5 (adjusted 13.9) as against 10.2 (adjusted 11.5) in 1949. Thus the excess of live births over deaths—the “natural increase”—was only 73, as compared with 104 in the previous year.

It must be recorded with great regret that 1950 has been a most unfortunate period as regards the infant deaths under 1 year of age, no fewer than 12 having been recorded, as compared with 8 in 1949, the respective rates per 1,000 live births being 57 and 33. It will be appreciated that when dealing with a relatively small number of total births (211) every additional infant death means an increase of approximately 5 in the infant mortality rate figure: but even so the rate of 57 compares most unfavourably with that for England and Wales as a whole (29.8) and is in fact practically double that figure. Of the 12 deaths recorded, 7 were under the age of 4 weeks, and of these 6 were less than 1 day old at death: in each of these cases death was due to prematurity or to gross congenital defects. In the cases of 3 of the 5 children who died between the ages of 4 weeks and 12 months, the causes of death were poliomyelitis, meningitis, and a supra-renal tumour. Thus it would seem that the heavy incidence in 1950 is unlikely to recur for some years to come, and that the year, as suggested above has been subject to the adversities of chance variation to a much greater extent than in recent years.

Once again it is found, in respect of the causes of death in general, that three great main groups of illness are responsible for approximately three quarters of the total death-rate. Of the 138 deaths

assignable to the District, diseases of the heart and blood vessels (excluding "strokes") caused 57 deaths, cancer, 20 deaths, vascular lesions of the nervous systems ("strokes") 15, whilst diseases of the respiratory system, pneumonia and bronchitis, resulted in the loss of 13 lives. Tuberculosis was responsible for 7 deaths in all, of which 6 were due to pulmonary tuberculosis. With the exception of these 7 deaths, and of the 5 due to pneumonia, the only other notifiable diseases which proved fatal were meningitis (2), poliomyelitis (1), and diphtheria (1), the last being a non-immunised child. No deaths have occurred as a result of pregnancy or childbirth.

With a total of 250 notified cases, infectious disease has shewn a moderate incidence, but this figure is again very nearly double that for 1949 (131 cases) which was however almost a low record for the district. The increase has principally been due to the occurrence of Whooping Cough (140 notified cases as compared with 51 in 1949) and to a heavier incidence of scarlet fever, of which there were 44 cases, as compared with 6 a year ago. All the scarlet fever cases were removed to hospital. Diphtheria, too, accounted for 5 cases, as compared with 2 in 1949: 4 of these were in young children, and 1 in an adult woman. Of these 5 cases, only one had been immunised.

The one case of poliomyelitis was not notified until after death: a post mortem diagnosis as the result of a post mortem examination.

I have again included in this Report information relating to the Local Health Authority Services provided under the National Health Service Act, 1946, the National Assistance Act, 1948, Childrens Act, 1948, and the Education Act, 1944, together with figures indicating the number of attendances, etc. at ante-natal and child welfare sessions held during the year, and also the number of cases handled by the Ambulance Service. Such services—the personal health services—have a very material beneficial influence on individual, and therefore on communal health, and must be regarded as complementary to, and as integral with, the older established environmental and sanitational public health services.

Reference to the vaccination and immunisation state of the population under 15 years of age shews that 72% of children in this age group were protected against diphtheria at the end of the year, compared with 58% for No. 10 Health Division as a whole: and that 52% of the infants born in 1949, and surviving in 1950 were successfully vaccinated. Whilst these figures are heartening, and compare favourably with those for surrounding County Districts, further improvement is required, especially as regards immunisation, as evidenced by the 5 confirmed cases of diphtheria, one fatal, described above. Not until a figure of 75%—80% of the child population is protected can the position be regarded as satisfactory.

From the public health aspect the first and foremost and most urgent requirements are undoubtedly the provision of more houses, the effective repair and reconditioning of existing properties, and the abolition of overcrowding. The unsatisfactory nature of the housing position cannot be overestimated or over emphasized, because of its adverse influence on the physical, psychological and moral health of the people. Improvements in drainage and sewerage systems, the paving of back streets, the more effective control of refuse disposal by tipping, and the prevention of pollution of streams and watercourses are also necessary : but to my mind the great and outstanding need is better housing accommodation. The slogan I would advocate would be :—“ Houses at whatever (financial) cost.”

I would conclude this preface by expressing to you, Mr. Chairman, to the Chairman of the Public Health Committee, and to all members of that Committee, and of the Council, my very sincere thanks for your help and understanding during the year in all matters affecting the work of the Health Department.

My gratitude to my colleagues in other Departments of the Council is also very real for their close and cordial co-operation. Especially must I thank the Sanitary Inspector, Mr. R. V. Watkin, who has collaborated with me in the production of this report, not only for his ever-willing and highly efficient assistance in those matters which are more properly within his sphere of authority than in mine, but also for the loyalty and understanding with which he has infused his co-operation.

I have the honour to be,

Mr. Chairman, Madam and Gentlemen,

Your obedient servant,

A. C. CRAWFORD

SECTION 1

GENERAL STATISTICS AND SOCIAL CONDITIONS

Area (acres)	2,395
Population (Census 1931)	10,352
Population (Registrar-General's estimate for mid-1950)	12,000
Number of inhabited houses (Census 1931)	2,029
Number of inhabited houses at end of 1950, according to Rate Books	2,943
Rateable Value	£46,084
Sum represented by 1d. rate	£182

The Township of Haydock extends from St. Helens C.B. in the West to the Urban District of Golborne in the East, a distance of approximately $3\frac{3}{4}$ miles. It is bounded on the North side by the Urban District of Ashton-in-Makerfield and on the South side by the Urban District of Newton-le-Willows.

The district is without any marked undulation of surface, the height above mean sea-level varying from 65 feet at the bottom of West End Road to 200 feet at the top of Millfield Lane.

The sub-soil consists of clay and marl with occasional beds of sand. Surface water gravitates via the various brooks and streams in the district to Sankey Brook.

The occupations of the working population are principally coal mining, engineering in connection with the Collieries and general light engineering.

SECTION 2

VITAL STATISTICS

Summary

Live Births

Legitimate—108 Male, 101 Female	.....	Total	209
Illegitimate—2 Male, 0 Female	.....	Total	2
Total Live Births	.....		211
Crude Birth Rate per 1,000 population	.....		17.6
Adjusted Birth Rate per 1,000 population	.....		17.9

Stillbirths

2 Male, 3 Female	.....	Total	5
Rate per 1,000 total (live and still) births	.....		23

Deaths

70 Male, 68 Female	.....	Total	138
Crude Death Rate per 1,000 population	.....		11.5
Adjusted Death Rate per 1,000 population	.....		13.9

Maternal Mortality Nil

Deaths of Infants under one year of age 12
 Rate per 1,000 live births 57

Neo-Mortality

Deaths of Infants under 4 weeks of age	.....	7
Mortality rate per 1,000 live births.....	.....	33

Population : At the Census in 1931 the population enumerated was 10,352. The Registrar-General's estimate for mid-1950 was 12,000 and this figure has been used in calculations of statistics in this report.

Births : During the year there were registered 211 births, being 110 males and 101 females, to Haydock parents, representing a crude birth rate of 17.6 per 1,000 of the population ; the birth rate for England and Wales was 15.8.

There were 5 stillbirths giving a rate per thousand (live and still) births of 23.

Deaths : The total number of deaths of Haydock residents whether within or without the district was 138, comprising 70 males and 68 females. The crude death-rate for 1950 was therefore 11.5 per 1,000 of the population as compared with a death-rate of 11.6 per 1,000 for England and Wales as a whole.

It will be noticed that the increase of births over deaths—the “ natural increase ”—for Haydock during the year was 73.

Infant Mortality : Deaths of infants under one year of age numbered 12, giving a rate per 1,000 live births of 57. The rate for England and Wales was 29.8.

There were no deaths from Measles or Whooping Cough.

Maternal Mortality : There were no "Maternal deaths," i.e. deaths due to or associated with pregnancy or parturition during the year.

Comparability of Crude Death Rates : If the populations of all areas were similarly constituted as regards the proportions of their sex and age groups, their crude death rates (deaths per 1,000 population) could be accepted as valid for purposes of comparison with other areas and with the country as a whole.

As the populations of the areas are not thus similarly constituted the Registrar-General supplies a "comparability factor" to each area, by which the crude death rate of the area should be adjusted.

The factor supplied to this area is 1.21 and the adjusted death-rate therefore becomes 13.9.

Comparisons of Births, Deaths, etc. : The tables on the following four pages give comparisons of the Births, Deaths, etc., for the year 1950 and the preceding 5 years ; also the causes of death in the Haydock Urban District for the year 1950.

BIRTHS

Year	Haydock		England and Wales
	Total Births	Rate per 1,000	Rate per 1,000
1945	211	19.3	16.1
1946	251	22.1	19.1
1947	282	24.4	20.5
1948	207	17.4	17.9
1949	225	18.9	16.7
1950	211	17.6	15.8

DEATHS

Year	H aydock		England and Wales
	Total Deaths	Rate per 1,000	Rate per 1,000
1945	119	10.9	11.4
1946	89	7.8	11.5
1947	123	10.6	12.0
1948	111	9.3	10.8
1949	121	10.2	11.7
1950	138	11.5	11.6

DEATHS UNDER ONE YEAR OF AGE

Year	Haydock		England and Wales
	Total deaths under one year	Rate per 1,000 live births	Rate per 1,000 live births
1945	12	56	46
1946	12	47	43
1947	13	46	41
1948	8	38	34
1949	8	36	32
1950	12	57	29.8

HAYDOCK U.D. Population— For Birth-rate } 12000 For Death-rate }	Per 1,000 of Estimated Population				Maternal Mortality Rate		Rate of deaths under one year per 1,000 live births
	Live Birth-rate	Crude Death-rate	Death rate from Resp. T.B.	Death rate from Cancer	Per 1,000 live births	Per 1,000 total births	
Year—							
1950	†17·6	*11·5	0·50	—	Nil	Nil	57
1949	18·9	10·2	0·34	1·09	Nil	Nil	36
Mean of 5 years, 1945-1949 ...	20·4	9·8	0·43	1·18	4·25	4·14	45
Previous year	—1·3	+1·3	+0·16	—	Nil	Nil	+21
Increase or decrease in 1950 on 5 years' average 1945-1949 ...	—2·8	+1·7	+0·07	—	—4·25	—4·14	+12

*1950 adjusted death rate (comparability factor 1·21) = 13·9 per 1,000.

†1950 adjusted birth rate (comparability factor 1·02) = 17·9 per 1,000.

**COMPARATIVE BIRTH-RATES, DEATH-RATES, ANALYSIS OF
MORTALITY, AND CASE-RATES FOR CERTAIN INFECTIOUS
DISEASES IN THE YEAR 1950**

	Haydock Urban District	England and Wales	126 County Boro's and Great Towns including London	148 smaller towns (Resident population 25,000 to 50,000 at 1931 census)	London adminis- trative County
Births—	Rates per 1,000 Civilian Population				
Live Births	17·6	15·8	17·6	16·7	17·8
Still Births	0·42	0·37	0·45	0·38	0·36
Deaths—					
All Causes	11·5	11·6	12·3	11·6	11·8
Typhoid and Parar- typhoid	0·00	0·00	0·00	0·00	0·00
Whooping Cough	0·00	0·01	0·01	0·01	0·01
Diphtheria	0·08	0·00	0·00	0·00	0·00
Tuberculosis	0·60	0·36	0·42	0·33	0·39
Influenza	0·00	0·10	0·09	0·10	0·07
Smallpox	—	—	—	—	—
Acute poliomyelitis and polio-encephalitis	0·08	0·02	0·02	0·02	0·01
Pneumonia	0·42	0·46	0·49	0·45	0·48
Notifications (corrected)					
Typhoid Fever	0·00	0·00	0·00	0·00	0·01
Para-typhoid Fever	0·00	0·01	0·01	0·01	0·01
Meningococcal Infection	0·17	0·03	0·03	0·02	0·03
Scarlet Fever	3·67	1·50	1·56	1·61	1·23
Whooping Cough	11·67	3·60	3·97	3·15	3·21
Diphtheria	0·42	0·02	0·03	0·02	0·03
Erysipelas	0·25	0·17	0·19	0·16	0·17
Smallpox	0·00	0·00	0·00	—	—
Measles	3·08	8·39	8·76	8·36	6·57
Pneumonia	1·42	0·70	0·77	0·61	0·50
Acute poliomyelitis (in- cluding polio-enceph alitis)					
Paralytic	0·00	0·13	0·12	0·11	0·08
Non-paralytic	0·08	0·05	0·05	0·06	0·05
Food Poisoning	0·00	0·17	0·16	0·14	0·25
Deaths—	Rates per 1,000 Live Births				
All causes under 1 year of age	57	29·8	33·8	29·4	26·3
Enteritis and Diarrhoea under 2 years of age	1·67	1·9	2·2	1·6	1·0
Notifications (corrected)	Rates per 1,000 Live and Still Births				
Puerperal fever and pyrexia	0·00	5·81	7·43	4·33	6·03
Maternity Mortality—	Haydock	England and Wales			
Abortion with Sepsis.....	0·00	0·09			
Other Abortion	0·00	0·05			
Complication of pregnancy and delivery	0·00	0·54			
Sepsis of Childbirth and Puerperium	0·00	0·03			
Other Complications of the Puerperium	0·00	0·15			

CAUSES OF DEATH—HAYDOCK U.D.C. 1950

Causes of Death	Males	Females	Total
All Causes	70	68	138
Tuberculosis, respiratory	2	4	6
Tuberculosis, other forms	1	—	1
Syphilitic disease	—	—	—
Diphtheria	1	—	1
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	1	1
Measles	—	—	—
Other infective and parasitic diseases	—	1	1
Malignant Neoplasms—			
Stomach	1	2	3
Lung, Bronchus...	2	—	2
Breast	—	1	1
Uterus	—	—	—
Other malignant and lymphatic neoplasms	9	5	14
Leukaemia, alukaemia	—	—	—
Diabetes	—	2	2
Vascular lesions of nervous system	8	7	15
Corony disease, angina	11	7	18
Hypertension with heart disease	2	2	4
Other heart disease	13	19	32
Other circulatory disease	2	1	3
Influenza...	—	—	—
Pneumonia	3	2	5
Bronchitis	5	3	8
Other diseases of respiratory system	—	—	—
Ulcer of stomach and duodenum	—	—	—
Gastritis, enteritis and diarrhoea...	1	1	2
Nephritis and nephrosis	1	1	2
Hyperplasia of prostate	—	—	—
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	—	3	3
Other defined and ill-defined diseases	6	4	10
Motor vehicle accidents	—	—	—
All other accidents	1	2	3
Suicide	1	—	1
Homicide and operations of war	—	—	—

SECTION 3

Infectious Diseases—Prevention and Control

250 cases of infectious disease were notified as compared with 131 during 1949. The main reason for the increase is the rise in the number of cases of scarlet fever notified from 24 in 1949 to 44 in 1950, and of whooping cough from 51 to 40.

Diphtheria

9 cases of diphtheria were notified but on further diagnosis at the infectious diseases hospital 4 of these cases proved to be tonsillitis. Of the 5 confirmed cases, 4 patients had not been immunised.

There was one death, a boy aged 6 years who had not been immunised.

Scarlet Fever

The number of cases notified was 44, an increase of 20 on the figure for 1949. Cases were generally of a mild nature, and there were no fatalities.

Measles and Whooping Cough

The incidence of measles was mainly confined to the third quarter of the year, while that of whooping cough was more or less evenly divided over the four quarters. All the patients were treated at home and all recovered.

Acute Poliomyelitis

One case of acute poliomyelitis was notified. This occurred in a child, 7 months of age, and proved fatal.

Isolation and Disinfection

The Infectious Diseases Hospital at Peasley Cross, St. Helens, is available for the treatment of Haydock cases.

63 cases from Haydock were admitted during 1950.

The use of the steam disinfector at the hospital is also available for the disinfection of bedding and clothing as and when required.

In all cases of diphtheria and scarlet fever disinfection of rooms, bedding and other articles is effected by means of Formic Aldehyde fumigation after the removal of the patient to hospital, or, if nursed at home, when the patient is certified free from infection.

NOTIFIABLE DISEASES DURING 1950

EXCLUDING TUBERCULOSIS, NOTIFICATIONS IN RESPECT OF NOTIFIABLE DISEASES NUMBERED 250. THE SUB-JOINED TABLE GIVES THE CORRECTED FIGURES AND THE NUMBER OF CASES REMOVED TO HOSPITAL. THERE WERE FOUR DEATHS.

Disease	Total cases at	Cases Notified Age Periods—Years									Total Deaths	Total cases removed to hospital
		0—	1—	3—	5—	10—	15—	25—	45—	65 and over		
Scarlet Fever	44	—	4	12	25	1	1	1	—	—	—	44
Diphtheria	5	—	—	1	2	1	—	1	—	—	1	5
Dysentery	1	1	—	—	—	—	—	—	—	—	—	1
Measles	37	2	16	10	9	—	—	—	—	—	—	—
Whooping Cough	140	14	52	43	29	2	—	—	—	—	—	—
Acute pneumonia (primary and influenza)	17	2	3	1	3	1	—	2	4	1	2	4
Meningococcal infection	2	2	—	—	—	—	—	—	—	—	—	2
Acute poliomyelitis	1	1	—	—	—	—	—	—	—	—	1	—
Erysipelas	3	—	—	—	—	—	—	1	1	1	—	—
TOTALS	250	22	75	67	68	5	1	5	5	2	4	56

Tuberculosis

Under the Public Health (Tuberculosis) Regulations, 1930, 12 new cases of respiratory and other forms of tuberculosis were notified. There were 6 deaths from tuberculosis of the respiratory system.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
Years								
0-2	—	—	—	—	—	—	—	—
2... ..	—	1	—	1	—	—	—	—
5... ..	—	—	—	—	—	—	—	—
10... ..	1	—	2	—	—	—	—	—
15... ..	—	—	—	—	—	1	—	—
20... ..	—	2	—	—	—	1	—	—
25... ..	2	—	—	1	2	—	—	—
35... ..	1	—	—	—	—	1	—	—
45... ..	—	—	—	—	—	1	—	—
55... ..	1	—	—	—	—	—	—	—
65... ..	—	—	—	—	—	—	—	—
75 and upwards	—	—	—	—	—	—	—	—
TOTALS	$\begin{array}{cc} 5 & 3 \\ \hline 8 \end{array}$		$\begin{array}{cc} 2 & 2 \\ \hline 4 \end{array}$		$\begin{array}{cc} 2 & 4 \\ \hline 6 \end{array}$		$\begin{array}{cc} — & — \\ \hline 1^* \end{array}$	

* Information supplied by the Registrar-General. Details as to age and sex unobtainable.

SECTION 4

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The district is supplied with water from the Rivington reservoirs belonging to the Liverpool Corporation.

The Haydock reservoir situated at the top of Millfield Lane has a capacity of 1,000,000 gallons, equal to approximately 5 days normal consumption.

The total consumption for the year was 92,083,750 gallons, or 21.68 gallons per head per day for all purposes.

The total estimated consumption for trade purposes was 14,755,000 gallons, or 2.91 gallons per head per day so that 18.77 gallons per head per day was used for domestic purposes.

The reservoir is emptied and cleansed periodically.

With the exception of one out-lying farm, all houses in the area are connected to the public water mains and the supply has been satisfactory in regard to both quality and quantity.

INSPECTION AND SUPERVISION OF FOOD SUPPLIES

Milk

Under the Milk and Dairies Regulations, 1949, the registration of dairy farms and dairy farmers, and the enforcement of the regulations on dairy farms (except in so far as they relate to diseases communicable to man), is now the responsibility of the Minister of Agriculture and Fisheries.

The local authority is responsible for those provisions which apply outside dairy farms ; for the provisions relating to diseases communicable to man ; and for the registration of distributors of milk and of dairies which are not dairy farms.

During the year 24 dealers' licences were issued under the Milk (Special Designations) Regulations, 1936 to 1948 ; 21 relating to the sale of sterilised milk, one to the sale of pasteurised milk and one to the sale of tuberculin tested milk.

Nine supplementary licences were issued ; 5 relating to the sale of pasteurised milk and 4 to the sale of tuberculin tested milk.

Samples of milk were taken periodically from all milk producers and retailers in the area and tested by the Public Health Laboratory Service for keeping quality and for the presence of the tubercle bacillus.

It is satisfactory to record that of the 27 samples tested all were found to be free from tuberculous infection and only one did not satisfy the Methylene Blue Test.

Meat and Other Foods

There are no slaughter-houses in operation in the area. Four persons are licenced by the local authority to slaughter animals under the Slaughter of Animals Act, 1933. The licences are valid for a period of three years and during the year under review the four licences were renewed for a further period of three years.

33 pigs were slaughtered on behalf of pig-keepers in the district for their own consumption. All were inspected after slaughter and found to be fit for human consumption.

All food shops and premises were inspected regularly.

The following foodstuffs were condemned as unfit for human consumption and destroyed :—

Milk	....	....	....	....	....	35 tins	....	....	68 pints
Meat	....	....	....	....	....	14 tins	....	....	30-lbs, 12-ozs.
Bacon	....	....	....	....	....	—	....	....	4-lbs., 0-ozs.
Fruit	....	....	....	....	....	49 tins	....	....	67-lbs., 0-ozs.
Vegetables	....	....	....	....	....	40 tins	....	....	41-lbs., 3-ozs.
Sandwich Spread	....	....	....	....	....	19 jars	....	....	3-lbs., 9-ozs.

No cases of food poisoning have occurred.

Six shops were registered under the Lancashire County Council (Rivers Board and General Powers) Act, 1938, for the sale of ice-cream, making a total of eleven shops on the register at the end of the year. In each case a refrigerator is installed in the shop and the ice-cream is sold wrapped as delivered to the shop.

There are no ice-cream manufacturers in the district.

The local authority is not a Food and Drugs Authority and sampling of food (under the Food and Drugs Act, 1938), for adulteration etc., is carried out by the County Council inspectors.

Samples taken in the district during the year and submitted for analysis were :—

Milk	....	....	....	....	....	....	....	....	52
Coffee	....	....	....	....	....	....	....	....	4
Castor Oil	....	....	....	....	....	....	....	....	4
Ice Cream	....	....	....	....	....	....	....	....	5
Sweets	....	....	....	....	....	....	....	....	1

All were certified by the County Analyst to be genuine.

Rivers and Streams

Some pollution of the streams running through the district occurs from the Sewage Works and the tip. The extent of the pollution is kept under observation and the streams cleansed when necessary.

Drainage and Sewerage

With the exception of a few out-lying premises all property is drained and sewered by gravitation to 4 sewage disposal works.

Sewage disposal is effected by means of settlement and filtration and is carried out under the supervision of the Council's Surveyor.

Having regard to the fact that the disposal works were constructed in the days of dry conservancy, and consequently now tend to become overloaded, the standard of effluent is reasonable.

Pollution, to some extent, of the brooks to which the effluent is discharged is unavoidable under the circumstances, and it is to be anticipated that new schemes of sewage disposal now envisaged will take effect in the not too distant future.

Sanitary Accommodation (Houses and Schools)

The numbers of the various types of conservancy measures in the district at the end of 1950 are as follows :—

Privy Middens	....	....	....	....	....	....	....	....	5
Pail Closets	....	....	....	....	....	....	....	....	Nil
Trough Closets	....	....	....	....	....	....	....	....	1 (school)
Waste-water Closets	....	....	....	....	....	....	....	....	Nil
Fresh Water Closets	....	....	....	....	....	....	....	....	2913
Dry Ashpits	....	....	....	....	....	....	....	....	Nil
Ashbins	....	....	....	....	....	....	....	....	2913

During 1950 one privy midden was converted to the fresh water system.

All the schools in the district, with the exception of one where insanitary trough closets are still in use, have reasonably satisfactory sanitary accommodation.

All schools are connected to the public mains for water supply and to the public sewers for sewage disposal.

At six of the schools washing and drinking facilities are inadequate.

Public Cleansing and Salvage

The collection of refuse is carried out under the control of the Council's Surveyor. Two motor vehicles are in operation and all dustbins are emptied weekly. Refuse is disposed of by means of controlled tipping ; paper, cardboard etc., is collected separately, baled at the Council's Depot and sold as salvage.

Rodent Control

Although infestations of rats and mice in the district are generally of a minor nature, the sewers, sewage works and refuse tip are subject to constant observation and regular treatments according to the methods recommended by the Ministry of Agriculture and Fisheries Infestation Control Division.

In addition to the annual 10% test of all the sewers in the area and to two treatments of infested portions of the sewers, the numbers of infestations found and treated were as follows :—

Dwelling Houses....	27
Sewage Works	7
Refuse Tip	4

Disinfestation

Infestations of houses with insect pests were dealt with by the use of insecticide containing D.D.T. and/or Gammexane dust, with good results.

The main source of infestation in the area is the refuse tip and this was treated twice with tip dressing to reduce the incidence of crickets, cockroaches and flies.

The number and types of infestations of houses dealt with during the year are as follows :—

Cockroaches	....	....	....	....	....	....	....	....	46 houses
Ants	....	....	....	....	....	....	....	....	26
Flies	....	....	....	....	....	....	....	....	10
Bugs	....	....	....	....	....	....	....	....	6
Crickets	....	....	....	....	....	....	....	....	6
Silverfish	....	....	....	....	....	....	....	....	3
Moths	....	....	....	....	....	....	....	....	3
Wood-beetles	....	....	....	....	....	....	....	....	1
Fleas	....	....	....	....	....	....	....	....	1

Offensive Trades

Only one establishment used for tripe dressing falls into this category.

Periodical inspections showed that the premises are clean and well maintained.

SECTION 5

HOUSING

At the end of 1950, according to the Rate books, the total number of houses in the area was 2,943.

More than half of this number are of the two-bedroom type, the majority of the remainder having three bedrooms.

During 1950, 20 traditional permanent houses were erected by the local authority and 7 by private enterprise.

At the end of the year 58 houses were in process of building on the Church Road site and a further 44 contemplated.

The number of dwellings in the district which are overcrowded, though not accurately known, constitutes a problem for which there appears to be no immediate solution. It is estimated that the main causes of the overcrowding are the natural increase of families, and members of families getting married and continuing to live at home.

Efforts to secure adequate repairs to older houses are impeded by shortage of labour and materials, and the high cost of repairs compared with existing low rentals.

1. Inspection of dwelling-houses during the year :—

(1) (a)	Total number of houses inspected formally or informally for housing defects (under Public Health or Housing Acts)	480
(b)	Number of inspections made for the purpose	1173
(2)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(3)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	466

2. Remedy of defects during the year without service of formal notices :—

	Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers	456
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3. Action under Statutory powers during the year :—

(a)	Proceedings under sections 9, 10 and 16 of the Housing Act, 1936	Nil
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(b) Proceedings under the Public Health Acts :—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	17
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) by owners	17
(b) by local authority in default of owners....	2
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936	Nil
(d) Proceedings under Section 12 of the Housing Act, 1936	Nil

SECTION 6

Industrial and Commercial Hygiene

Three new factories were added to the register during the year, bringing the total number registered to 19.

This figure comprises 10 factories in which mechanical power is used and 9 without mechanical power.

The types of factory are :—

Engineering	6
Bakehouses	6
Brick-making	1
Boot and Shoe Repairs	3
Joinery	1
Pre-cast concrete goods	1
Laundry	1

29 visits of inspection were made during the year.

Defects found and remedied were as follows :—

Want of cleanliness	1
Unsuitable or defective sanitary conveniences	3

Conditions generally were good and in no case was it found necessary to resort to written notice.

No references were received from H.M. Inspector of Factories.

SECTION 7

SANITARY INSPECTION

SUMMARY OF INSPECTIONS, VISITS, Etc.

Dwelling-houses (under Public Health and Housing Acts)	480
Re-inspections and re-visits to above	693
Housing conditions and overcrowding....	26
Water supply (inspections and re-inspections)	98
Drainage (inspections and re-inspections)	124
Conversions of Privy-middens (inspections and re-inspections)	5
Ditches and Water Courses (inspections and re-inspections)	12
Accumulations of refuse	6
Piggeries and keeping of animals	10
Tents, vans and sheds	4
Schools	7
Cinemas	1
Offensive Trades	19
Rodent Control	166
Disinfestation of dwelling houses	85
Infectious disease enquiries and disinfections	72
Dairies and Milkshops	27
Food shops and premises	114
Other Shops	111
Ice-cream premises....	21
Factories	29
Interviews with Owners and Contractors	33
Pigs inspected after slaughter	33
Milk samples	32
Water samples	2
Miscellaneous	31
Total	2268

Number of Nuisances or Defects discovered	755
Number of Informal Notices served	279
Verbal Notices and/or letters	150
Number of Statutory Notices served	21
Number of Notices complied with at the end of 1950	434
Number of Nuisances or defects abated at end of 1950	714
Legal Proceedings	Nil

ANALYSIS OF DEFECTS

Type of Defect	No discovered	No remedied
Water Closets	183	133
Drains	57	56
Water Supply	22	36
Sinks	12	13
Waste Pipes	14	18
Dustbins	94	104
Washboilers	4	3
Roofs	56	44
Chimneys and Flues	11	12
Eavesgutters	54	85
Downspouts	14	28
Brickwork and/or Pointing	27	27
Plastering	31	33
Floors	14	12
Windows	52	51
Doors	8	5
Firegrates	15	14
Dampness	31	16
Yard Paving	6	4
Miscellaneous	50	20
Total	755	715

SECTION 8**PROVISION OF GENERAL HEALTH AND ANCILLARY SERVICES IN THE DISTRICT****(1) Laboratory Arrangements****(Public Health Laboratory Service, and County Analyst's Department)**

Pathological specimens, samples of milk, foodstuffs, "swabs," etc., for bacteriological investigation are dealt with by the Public Health Laboratory Service either at the Public Health Laboratory, Mount Pleasant, Liverpool, or at the Public Health Laboratory, Monsall Green, Monsall, Manchester. The chemical analysis of water samples, and of samples of food and drugs, is undertaken at the County Analyst's Department, County Offices, Preston.

(2) Hospital Arrangements**(Liverpool Regional Hospital Board, St. Helens and District Hospital Management Committee, and Warrington and District Hospital Management Committee)**

The Haydock Cottage Hospital is the only hospital situated in the district ; it is a General Hospital with a nominal establishment of 13 beds, but in view of its small size it is not equipped to deal with major surgical cases. The district is mainly served, for general cases, by the St. Helens Hospital, and also by the Providence Hospital, St. Helens. Maternity cases requiring hospital treatment are admitted either to the County Hospital, Whiston, the St. Helens Maternity and Welfare Hospital, the General Hospital, Warrington, or to the Warrington Maternity Home, Victoria Park, Latchford, Warrington. Cases requiring isolation on account of Infectious Disease are normally admitted to the Peasley Cross Isolation Hospital, St. Helens.

In addition to the above, cases requiring highly specialised treatment for pediatric, orthopaedic, ophthalmic, ear, nose, throat and gynaecological disabilities may be admitted, by arrangements, to any of the 'teaching hospitals' attached to the Universities of Liverpool or Manchester, and situated within, or in close proximity to those cities.

(3) Ambulance Arrangements

Full responsibility for the Ambulance Service (provided under Section 27 of the National Health Service Act, 1946) rests with the Lancashire County Council—the "Local Health Authority"—under the Act, and the Urban District is serviced by staff and vehicles maintained at the County Ambulance Station, Gas Street, Earlestown, Telephone No. Newton-le-Willows 3134.

This Service deals with all types of case where such transport is required by reason of illness (including mental illness), or mental defectiveness, whether accident or emergency, general illness or infectious disease. In cases of emergency any person having reason to do so may summon an ambulance : in other cases the calls for this service are made either by a doctor, dentist, midwife, nurse or other duly qualified person.

Three Stretcher-carrying ambulance vehicles and two "Sitting case" cars are stationed at the Newton-le-Willows Depot, manned by an appropriate staff, all qualified in First Aid. During 1950 the following numbers of calls were dealt with from this district :—

Emergency 270, General 1281, Infectious 68, Total 1,619.

(4) **Treatment Centres and Clinics**

- (i) **School Health**—School Clinic, Station Road, Haydock.
Assistant Divisional Medical Officer, Dr. E. A. Lumley.
School Nurse/Health Visitor, Miss S. N. Hodgson.

Sessions "Minor Ailments" and Medical Inspection.

Doctors Sessions : Weekly—Tuesday a.m. during School term.

Nurses Re-Dressing Sessions : Weekly—Friday a.m. during School term.

Ophthalmic

Ophthalmic Surgeon—Mr. E. Allan.

Health Nurse in Charge—Miss Hodgson.

Sessions : Fortnightly—Thursday a.m. (by appointment only)

Orthopaedic

Orthopaedic Surgeon—Mr. Almond.

Orthopaedic Physiotherapist—Miss Graham.

Sessions : Surgeon's sessions—monthly, morning of the first Monday (by appointment only).

Physiotherapist—Weekly (by appointment only).

Dental

Dental Surgeon—Mr. A. E. Shaw.

Dental Attendant—Miss Entwistle.

Sessions : By appointment only, but the Dental Surgeon has always been very willing to deal with urgent cases for the relief of pain, if he is in attendance at the Clinic.

It must be noted with great regret that Mr. Shaw resigned his appointment during the year, and it has been found not possible to replace him.

- (ii) **Ante-Natal Clinic** (Held at the School Clinic, Station Road, Haydock).

Obstetrician—Dr. Marshall.

Health Visitor in Charge—Miss Hodgson.

Sessions : Fortnightly—alternate Tuesday afternoons. These sessions are attended whenever possible by the local County Midwives, who assist at the examination of their patients. Where hospital confinement is advisable, either on obstetrical or sociological grounds, the necessary arrangements are made for admission.

During the current year a total of 80 expectant mothers made 280 attendances.

(iii) **Maternity and Child Welfare Clinic** (Held at the School Clinic, Station Road, Haydock).

Assistant Divisional Medical Officer—Dr. E. A. Lumley.

Health Visitor in Charge—Miss Hodgson.

Sessions : Weekly—each Wednesday morning.

The purpose of these Clinics is to facilitate the medical examination and general supervision of infants and small children up to the age of 5 years, and to advise the mothers regarding their nurture and welfare. As an ancillary service, in order to help the parent to implement the advice received regarding feeding methods, a number of artificial infant foods, and of vitamin preparations etc., are available to those regularly attending, at cost price. In addition, expectant mothers who attend with infants or other young children are advised regarding the maintenance of their general health, and on other problems connected with their pregnancy : and are of course referred for special obstetrical advice to the Ante-Natal Clinic.

The following figures show the use made of the Child Welfare Clinic during the year :—

No. of individual children in attendance		No. of attendances
Age under 1 year	213	1,844
Age 1 to 2 years	28	199
Age 2 to 4 years	17	42

(5) **Midwifery Arrangements**

Two whole-time salaried Midwives are employed by the County Council—the “Local Health Authority” and “Local Supervising Authority”—for the purpose of conducting domiciliary confinements, either as midwives (when assuming sole responsibility for the delivery, etc.), or as maternity-nurses (when assisting at delivery in conjunction with the Doctor). Each midwife possesses a car, in order to enable her to respond speedily to urgent calls, and to transport analgesia apparatus.

The names and addresses of these midwives are : Mrs. E. Bramhall, 103, Kenyons Lane, Haydock. Telephone Ashton-in-Makerfield 7396. Mrs. E. J. Pye, 57, Kenyons Lane, Haydock. Telephone Ashton-in-Makerfield 7376.

No private midwife practises within the district, nor is there any private Maternity Home so situated. These ladies were therefore responsible, either as midwives or maternity-nurses, for the 103 domiciliary confinements which took place during the year. The fact that there were no cases of puerperal pyrexia or puerperal fever, and no "maternal deaths" associated with childbirth, is surely a high tribute to the skill and care bestowed on these mothers.

(6) Health Visiting Arrangements

This work has in Haydock been carried out for many years by one Health Visitor, who combines with her Health Visiting duties those of School Nurse. The scope of her work has been considerably increased by the responsibility which now rests on Health Visitors to advise on general health matters relating to the family as a whole, and not solely in relation to infants, young children and school children. Further -more she has a specific responsibility in relation to advice on immunisation against Diphtheria.

These domiciliary visits, so necessary as regards not only supervision, but also health education, are of course complementary so far as pre-school schoolchildren are concerned with the work carried out at the Child Welfare Centre.

The name of the School Nurse/Health Visitor for the District is Miss S. H. Hodgson, with whom contact may be established at the School Clinic, Station Road, Haydock.

(7) Mental Health Arrangements

The District is covered for this purpose by the Authorised Officer of the Local Health Authority attached to No. 10 Health Division, assisted by a lady mental welfare worker. These workers deal with all aspects of mental health, including cases for which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency Acts and the Mental Treatment Act.

The names and addresses of these officers are :	
Mr. P. D. Parker	No. 10 Divisional Health Offices,
	The Old Rectory, Winwick,
	Nr. Warrington
Miss M. Hargan,	ditto.

(8) Home Help Arrangements

This is a permissory service provided by the County Council through its divisional Health Scheme (No. 10 Divisional Health

Committee), and is one which is not necessarily provided free of cost to the public. It aims to provide domestic help where required by reason of the presence in a household of sickness, pregnancy, maternity, young children or a mentally defective person. This service has been used during the present year to a moderate degree only, probably because the public, not having full knowledge of the recently instituted scheme, have yet to experience its full benefits.

The "Home Helps" engaged are all part-time workers, none are full time, nor do any receive a "retaining fee." The Home Help Organiser and Welfare Worker, responsible for the day to day operation of the scheme in this District, is Miss P. Butler, No. 10 Divisional Health Office, The Old Rectory, Winwick, near Warrington, the former Organiser, Miss D. Wilson, having resigned owing to ill health.

(9) Home Nursing Arrangements

Nursing help in the home, formerly provided by the District Nursing Associations, is now afforded by the Local Health Authority, the former District Nurse, as an Officer of that Authority continues her beneficent work in the homes of the sick. The public demand for this onerous work has grown considerably during the year, and the assistance of a part-time relief nurse has been required from time to time.

The "Home Nurse" for the District is :—
Miss V. M. Dunn, 99, Central Drive, Haydock.

(10) Arrangements for the Prevention of Illness, Care and After Care of Sick persons (including those suffering from Tuberculosis) and the provision of convalescent accommodation

Responsibility for the above rests with the Local Health Authority, partly an obligatory, and partly on a permissive basis: 'illness' also includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of "Health Education" and propaganda relating to health matters, health visiting in the homes, including those of persons suffering from Tuberculosis, the provision of ancillary nursing equipment, the after-care of patients who have suffered from illness, whether at home or in hospital, and the provision of convalescent accommodation and rehabilitation measures where these are required to enable those recently sick to regain full health and strength.

The Tuberculosis Health Visitor for the District is Miss Webster. She maintains supervision of patients in their homes, and arranges for their examination, re-examination, and for that of "contacts," (including X-ray investigation), at the Chest Clinic (formerly the Tuberculosis Dispensary), at St. Helens, which is a branch of the principal Chest Clinic for the area situated at Waterloo, Liverpool, and is administered by the Liverpool Regional Hospital Board.

As regards Health Education—a very important and essential factor in the prevention of illness—it is pertinent here to emphasise that although some responsibility for this side of preventive medicine may be accepted (as is the case), by the County Council as Local Health Authority, the permissive powers of the Urban District Council, (as a Local Sanitary Authority), to carry out measures of health education under Section 179 of the Public Health Act, 1936, are still extant, and should in my view continue to be exercised, particularly in respect of the dissemination of information relating to the spread of infectious diseases.

(11) **Vaccination and Immunisation Arrangements**

Vaccination, and immunisation against Diphtheria, are available to all who desire it, either through the family doctor, who carries it out as part of his duties to his patients, or by attendance at one of the Immunisation Sessions held at approximately monthly intervals at the School Clinic, Station Road, where the work is carried out either by one of the local doctors, or by the Assistant Divisional Medical Officer.

Whilst the immunisation position shows no grounds for complacency, the situation as regards the “immunisation state” of children under 15 years of age is more satisfactory than in most areas: on 31st December, 1950, the proportion was 72%, as compared with 58% for No. 10 Health Division as a whole. Unfortunately the vaccination state is not so satisfactory as one could wish, although here again the Urban District is securing a higher proportion of infant vaccinations than is the majority of County Districts in the Health Division. If one deducts from the 226 births notified in 1949 the 12 infant deaths recorded in 1950, out of the 214 survivors, 112 were vaccinated, 110 successfully; a proportion of 52% of the newly born babies.

(12) **The Children Act, 1948**

This Act became effective on 5th July, 1948.

In the main it provides for the care and welfare of children and young persons up to the age of 18 years who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of this Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the efficient administration and day to day operation of the Service, which is carried out on a regional area basis.

The Haydock Urban District lies administratively within the purview of the Area Children's Officer of the Huyton Area, who is assisted by Children's Social Workers, the latter being responsible for

all matters relating to "deprived" children, e.g. the provision of accommodation, the inspection of and report on prospective foster homes, infant life protection, supervision of adopted children during the probationary period, and the care and conveyance to suitable places of safety of children committed by the Courts to the care of the Authority as a "fit person," under the provisions of the Children and Young Persons Act, 1933, and so on.

The Area Children's Officers and their visitors work in close co-operation with the Divisional Medical Officers and their staffs, and I am happy to say that in this district (included in No. 10 Health Division) the relationship is most effective and cordial.

The Huyton Area Children's Officer is :—

Mr. S. H. Pitt, Nutgrove Villa, 76, Derby Road, Huyton, near Liverpool, and the Children's Visitor for the Urban District is :—

Miss J. W. Cole, Nutgrove Villa, 76, Derby Road, Huyton, near Liverpool.

(13) **National Assistance Acts, 1948**

The Local Authority carrying responsibility for the implementation of Parts III and IV of this Act is the County Council, and the administrative machinery, in this case, is also on the divisional basis. The main provisions of Part III relate to accommodation for the disabled and aged, to temporary accommodation for persons who, by virtue of circumstances which could not reasonably have been foreseen, are without lodging, and to welfare services in general, for persons handicapped by infirmities such as Blindness, Deafness, Dumbness, Crippling physical defects and other disabilities.

The approved scheme of the County Council in regard to welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of this Act prescribes the procedure whereby aged or infirm persons, if not receiving adequate care and attention in their own homes may, by Court Order, be removed to a suitable hospital following a hearing by the Court of Evidence in Support of a Certificate issued by the Medical Officer of Health after due consideration of all the circumstances of the case.

Section 50 of the Act is of importance in that it places on this County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority.

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